#### INSTRUCTIONS FOR THE ANNUAL REPORT

#### Which forms must I submit?

- Form 1 Any site required to file an Annual Report must submit this form, even if zero pounds of hazardous waste were generated in 2009.
- Form 2 Each hazardous waste stream generated, managed, and/or shipped off site in 2009 must be represented on a Form 2. If waste is shipped off site, a Form 4 must also be filed. A Form 2 is not necessary for a hazardous waste stream registered to your site but not generated and/or shipped in 2009.

Do not combine liquid and solid waste streams on the same Form 2. Use a separate Form 2 for each liquid waste stream and each solid waste stream.

- Form 3 Any site receiving hazardous waste from off site and managing it on site must complete Form 3. A Form 5 must also be filed.
- Form 4 Any site that shipped hazardous waste off site during 2009 must complete a Form 4.
- Form 5 Any site that received hazardous waste from off site in 2009 must complete a Form 5.

**IMPORTANT**: All pages in the Annual Report must be sequentially numbered, from the first page on Form 1 to the last page submitted (i.e. Page 1 of 10, 2 of 10, 3 of 10, etc.)

A copy of the Annual Report must be sent to the county judge/executive of the county, or chief executive officer of an urban county government, within the county that the waste was generated in, and also to the county judge/executive of the county or chief executive officer of an urban county government within the county where the waste was shipped to per KAR 32:040 Section 2(3). Address listings are in the Appendix.

#### Electronic Filing is available!!!

Electronic filing is available at no cost; however, it is limited to large quantity generators, treatment facilities, storage facilities, and disposal facilities only. To download the EasiTrak Annual Report, go to <a href="https://www.arminc.net">www.arminc.net</a>. Be sure to select the Kentucky version.

A printed, paper copy of the Annual Report must be mailed to the Division of Waste Management in addition to electronic filing of the report. Mail to the address on page 1 and remember to include an original signature on Form 1. The Assessment Return is not on EasiTrak. See page 26 of this Booklet.

For answers about electronic filing, call Amy Earlywine at (502) 564-6716 or e-mail: amy.earlywine@ky.gov.

#### FORM 1 – Identification and Certification

#### 1. Reason for Submittal

The box is already checked for you, "As a component of the Hazardous Waste Annual Report". This is a requirement for any facility that is or was a Small Quantity Generator, Large Quantity Generator or Treatment Storage and Disposal facility during any part of the report year.

#### 2. Site Identification Numbers

- EPA ID NUMBER Enter the EPA ID Number provided on the Certificate of Notification of Hazardous Waste Activity. Put this number on all pages of the Annual Report and Assessment Return.
- AGENCY INTEREST NUMBER Write or type your company's Department for Environmental Protection Agency Interest number (Al#) on the blank line provided. This may be found on the Certificate of Registration.

#### 3 & 4. Site Name and Site Location Information

Enter the name exactly as it appears on the Certificate of Notification of Hazardous Waste Activity. Provide the <u>actual location</u> of your company where waste is generated. Do not use a post office box or route.

# 5. Land Type

Select the best description of the site land type. Select only one type.

#### 6. North American Industry Classification System Code (NAICS)

The NAICS (North American Industry Classification System) is an industry classification code which has replaced the SIC Code. You can find the NAICS code for your company from this web site: <a href="http://www.naics.com/search">http://www.naics.com/search</a>. Find your NAICS code by typing in a key word or phrase in the search box that describes what your company does.

#### 7. Site Contact and Mailing Address

• CONTACT PERSON – Provide the name of the person who may be contacted if there are questions about the information on this form.

- PHONE & E-MAIL Provide the phone number, phone extension, and e-mail address of the contact person who is listed above.
- MAILING ADDRESS Provide the official mailing address for your facility.
  This may be the same as the location address or a post office box number. It
  may also be a corporate/home office located in another city or state. However,
  this address should be that of the contact person.

NOTE: All Annual Report correspondence will be mailed to the mailing address and to the attention of the contact person provided on this form.

#### 8. Site Operator Information

An Operator is the person responsible for the overall operation of the Site. This is the legal entity which controls the site operation rather than the plant or site manager. This is usually a company or business name, not an individual.

Enter the date (mm/dd/yy) on which the above entity became the operator of your site.

# 9. Legal Owner Information

- LEGAL OWNER NAME Provide the name of the legal owner(s) of the entity doing business at this location.
- DATE BECAME OWNER Provide the date on which the above entity became the owner.
- OWNER TYPE Place an "X" in the box that best describes the owner type of your site. Select only one type.
- PHONE Provide the phone number and, if applicable, the phone extension of the generator's legal owner.
- ADDRESS Provide a complete mailing address where the generator's legal owner can be reached.

#### 10. Legal Landowner of the Real Property

- LEGAL LANDOWNER NAME Provide the name of the legal landowner(s) of the property.
- DATE BECAME OWNER Provide the date on which the above entity became the property owner.
- OWNER TYPE Place an "X" in the box that best describes the landowner type of your site. Select only one type.
- PHONE Provide the phone number and, if applicable, the phone extension of the generator's landowner.
  - ADDRESS Provide a complete mailing address where the generator's landowner can be reached.

# 11. Type of Regulated Waste Activity

Check the box that indicates your site's registered generator status as of December 31, 2009.

- If your site was registered as either a Large or Small Quantity Generator at some time during the 2009 calendar year, but changed status to a Conditionally Exempt Small Quantity Generator by December 31, 2009, the Annual Report and Assessment Return must be submitted.
- For sites that generated and/or shipped zero pounds of hazardous waste during the year, <u>provide an explanation under section 13 comments</u>. If more room is needed, attach an additional page with comments.

**NOTE:** The Annual Report and Assessment Return must be submitted even if zero pounds were generated during the time the facility was a Large or Small Quantity Generator.

#### A. HAZARDOUS WASTE ACTIVITIES

- 1. GENERATOR OF HAZARDOUS WASTE
  - ONE-TIME GENERATOR Place an "X" in the "No" box if you generate hazardous waste on a continual basis. Place an "X" in the "Yes" box if your company will not generate hazardous waste in future years at this site (i.e., underground storage tank removal).
    - NOTE: One-Time-Only Generators are not required to renew the EPA ID number. The EPA ID number will be automatically deactivated one year after the effective date.
  - GENERATOR STATUS Place an "X" in only one of the following boxes to indicate the maximum quantity of hazardous waste your company will generate in any single calendar month.
- 2. FUEL BURNER OF HAZARDOUS WASTE FOR ENERGY RECOVERY Place an "X" in this box if your company burns fuel for energy recovery. Also, place an "X" in the box or boxes below if your company uses an industrial boiler or an industrial furnace to burn hazardous waste for energy recovery.
- 3. UNITED STATES IMPORTER OF HAZARDOUS WASTE Place an "X" in this box if your company imports hazardous waste from a foreign country into the United States.
- 4. MIXED WASTE GENERATOR Place an "X" in this box if your company generates mixed waste (waste that is both hazardous and radioactive). RCRA defines "mixed waste" as waste that contains both hazardous waste and source, special nuclear, or by-product material subject to the Atomic Energy Act.
- 5. TRANSPORTER OF HAZARDOUS WASTE Place an "X" in this box if your company transports hazardous waste. Do not mark if another company transports your waste. If you transport hazardous waste, place an "X" in all boxes that describe the mode of transport employed.

- 6. TREATMENT/STORAGE/DISPOSAL FACILITY Place an "X" in this box only if you operate or are applying for a permit to operate an on site hazardous waste facility under a Part B permit or interim status.
- 7. RECYCLER OF HAZARDOUS WASTE Refer to 401 KAR 36 and 401 KAR 31:010, Section 6, and place an "X" in all categories that apply.
  - <u>Lead-Acid Battery Recycler</u>: Place an "X" in this box if you reclaim spent lead-acid batteries on your property. This category does not apply to companies that accumulate batteries for off site shipment to a battery recycler.
  - Precious Metals Recycler: Place an "X" in this box if you generate, transport or store recyclable materials for precious metal recovery (i.e., silver recovery from photographic solutions). Note that the original amount of waste generated (i.e., silver fixer fluid) must be reported in the Description of Hazardous Wastes. If the on site treatment unit meets the definition of a wastewater treatment unit, registration as a recycler on this form is NOT required. Wastewater treatment units are allowed to handle hazardous waste fixer under a permit-by-rule (401 KAR 38:060, Section 1(5)) if the discharge is regulated by the KPDES program.
  - Other Recycler: Place an "X" in this box if your on site recycling method has NOT been identified in any other area of this form. Briefly describe the hazardous waste recycling operation (i.e., on site solvent distillation).
- 8. EXEMPT BOILER AND/OR INDUSTRIAL FURNACE Place an "X" in this box if one or both of the following apply to your company:
  - Place an "X" in box (a) to indicate that your company qualifies for the Small Quantity On site Burner Exemption, if you burn small quantities of hazardous waste in an on site boiler or industrial furnace in accordance with the conditions in 401 KAR 36:020, Section 9
  - Place an "X" in box (b) to indicate that your company qualifies for the Smelting, Melting, and Refining Furnace Exemption if you process hazardous wastes in a smelting, melting, or refining furnace solely for metals recovery, or to recover economically significant amounts of precious metals, or if you process hazardous wastes in a lead recovery furnace to recover lead, as described in 401 KAR 36:020, Section 1.
- 9. UNDERGROUND INJECTION WELL Refer to 401 KAR 35:270. Place an "X" in this box if you operate an on site hazardous waste injection well.

#### B. UNIVERSAL WASTE ACTIVITIES – Refer to 401 KAR 43

- LARGE QUANTITY UNIVERSAL WASTE HANDLER Place an "X" in this box if you are a universal waste handler who accumulates 5,000 kilograms (11,000 pounds) of universal waste at any time. You must identify all applicable categories of universal waste being handled.
  - Place an "X" in all boxes that apply to indicate that your company generates and/or accumulates batteries, unused pesticides, thermostats, and/or spent lamps (including fluorescent lamps).

- DESTINATION FACILITY FOR UNIVERSAL WASTE Place an "X" in this box if your company treats, disposes of, or recycles universal waste on site. A hazardous waste permit is required if you treat or dispose of universal wastes; a permit may be required if your company recycles universal wastes.
- C. USED OIL ACTIVITIES Refer to 401 KAR 44. Place an "X" in all boxes that apply.
- 1. USED OIL TRANSPORTER Place an "X" in this box and place an "X" in box (a) and/or box (b) if you transport used oil, collect used oil from more than one generator and transport the collected oil, or if you own or operate a used oil transfer facility.
- 2. USED OIL PROCESSOR AND/OR RE-REFINER Place an "X" in this box and place an "X" in box (a) and/or box (b) if you process used oil.
- 3. OFF-SPECIFICATION USED OIL BURNER Place an "X" in this box and place an "X" in box (a) and/or box (b) and/or box (c) if you burn used oil.
- 4. USED OIL FUEL MARKETER Place an "X" in this box and place an "X" in box (a) and/or box (b) if you direct shipments of off-specification used oil from your facility to a used oil burner or are the first person to claim that used oil to be burned for energy recovery meets the used oil specifications in 401 KAR 44:010, Section 2.

## 12. Description of Hazardous Wastes

- A. Waste Codes for <u>Federally Regulated</u> Hazardous Wastes. All wastes except those listed as N001, N002, and N003, are Federally Regulated Wastes. Your complete list of Federally Regulated Hazardous Wastes can be found on your current Certificate of Registration of Hazardous Waste Activity. You may also use just the waste codes listed on the Form 2s submitted in your Annual Report for the report year.
- B. Waste Codes for <u>State-Regulated</u> Hazardous Wastes. (These numbers are N001, N002, and N003. They pertain to nerve and blister agents as required by KRS 224.50-130). Leave this area blank or put "N/A" if you do not have these wastes.

#### 13. Comments

Source Codes, Form Codes, and Management Method Codes that ask you to "specify" the code, use this space to clarify your choices. If you wish to clarify anything, at any time, while completing the Annual Report, do so in the Comments section. Reference the Item Number you are clarifying and provide additional clarification here.

If you reported zero generation of waste for the reporting year, please provide an explanation in this section.

#### 14. Certification Statement

This line must contain an **original signature in blue ink**. More forms are deficient in this area than in any other. You keep the Xerox copy. Send the Original to the Branch. See 401 KAR 38:070, Section 7 for an explanation of legal requirements for authorized signatures. In short, the signature of a president, secretary, treasurer, or vice president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions for the corporation may sign. A duly authorized person, designated in writing may sign.

# FORM 2 - Waste Generation and Management

If waste is shipped off site, Form 4 must also be filed.

Submit a Form 2 for each hazardous waste stream that was:

- Generated on site and subsequently managed on site or shipped off site in 2009; or
- Generated on site in 2009 but neither managed on site nor shipped off site until after 2009; or
- Generated on site <u>prior to</u> 2009 but either managed on site or shipped off site in 2009; or
- Imported from a foreign country and managed on site or shipped off site in 2009.

Do not combine liquid and solid waste streams on the same Form 2. Use a separate Form 2 for each liquid waste stream and each solid waste stream. If the waste stream is both a solid and a liquid, use a separate Form 2 for the liquid component and a separate Form 2 for the solid component.

Duplicate the Form 2 as needed and complete a Form 2 for each separate hazardous waste stream. A Form 2 is <u>not</u> necessary when a waste stream registered to your site was not generated and/or shipped in the report year.

| waste  | Descripti  | on      |        |    |        |      |       |    |         |    |             |
|--------|------------|---------|--------|----|--------|------|-------|----|---------|----|-------------|
| Please | indicate   | whether | waste  | is | liquid | or   | solid | by | placing | an | appropriate |
| checkm | ark in the | Liq     | uid or |    | Solid  | line | S.    |    |         |    |             |

Line (1): Provide a concise description of the waste including the source and generic chemical name or primary hazardous constituents. Example: "Ignitable spent solvent from degreasing operation in tool production; mixture of mineral spirits and kerosene."

Line (2): Enter the exact waste description as it appears on the manifest.

For Lab packs – Use one Form 2 to identify each lab pack waste stream that contains the <u>same</u> waste codes and waste description. If waste codes or waste description vary, a separate Form 2 should be provided.

#### **EPA Hazardous Waste Code(s)**

Enter the four-character EPA hazardous waste code(s) that applies to the waste described above. These codes can be found in 401 KAR 31:030 and 31:040 and on your Certificate of Registration and manifest copies. If the waste stream was a lab pack, enter LABP along with a list of all EPA waste codes contained in the lab pack. If more room is needed, attach an additional page with comments.

#### State Hazardous Waste Code

Enter the four-character State hazardous waste code(s). In Kentucky, this is limited to nerve and blister agents only. These codes can be found in 401 KAR 31:040 Section 5. If the waste identified on this Form 2 is not a nerve or blister agent, leave this box blank.

#### Source Code

See Source Codes listed in Appendix A-1. Enter only one code. Important: For the Source Code "G25 — Hazardous Waste Management," a Management Method code must also be provided. The Management Method Codes can be found in Appendix A-5. Use "Comments section" on Form 1 if clarification is needed.

#### Form Code

See Form Codes listed in Appendix A-2 and A-3. Enter only one code.

#### **Quantity Generated in Report Year**

Enter the total quantity of this hazardous waste stream generated in 2009. Report in pounds. If your on site records do not identify the weight of the waste, you may use the Conversion Chart listed in Appendix A-4 or apply your knowledge of the weight of the waste to convert it to pounds.

#### Enter the value used to convert this waste to pounds

If you used a conversion factor to obtain the weight of your waste, identify the value used to convert the waste amount into pounds here.

#### On Site Management

Was any of this waste managed on site by treatment, recycling, disposal, or by discharge to a sewer or publicly owned treatment works (POTW)? If the answer to this question is Yes, complete the rest of this section.

# On site Process System 1 and On Site Process System 2

Two blocks are provided to identify two separate on site waste management systems for the waste described on this Form 2.

#### On Site Management Method Code

See Management Method Codes listed in Appendix A-5.

# **Quantity Treated, Recycled, Disposed**

Enter the quantity of the hazardous waste stream that was treated, recycled, or disposed of on site using the listed Management Method Code. Report in pounds.

Example: A firm generated 100 tons of F002 solvent waste in 2009. Eighty (80) tons were recycled for reuse in a batch distillation processing system, generating 5 tons of still bottoms. The remaining 20 tons were burned in an industrial burner.

For On Site Process System 1, Management Method Code H020 for distillation would be entered with a quantity of 160,000 pounds (80 tons x 2000 pounds).

For On Site Process System 2, Management Method code H050 for energy recovery of liquids would be entered with a quantity of 40,000 pounds (20 tons x 2000 pounds).

# Waste Shipped Off Site

If Yes, complete this form and submit a Form 4. Include hazardous waste that was received from off site and shipped off site, whether or not it was treated prior to shipment.

Space is provided to report shipments of the waste to two different off site facilities. If more space is needed, copy this form and complete only the Waste Shipped Off Site section. Number the page sequentially and identify it as a continuation of the Form 2.

# Name of Receiving Facility/EPA Number of Receiving Facility

The name and EPA ID number of the receiving facility and the quantity of waste shipped off site to the receiving facility should correspond with information reported on Form 4.

#### Off Site Management Method Code

See Management Method Codes listed in Appendix A-5. Obtain this information from the receiving facility and/or from the manifest.

#### FORM 3 - Waste Received From Off Site

If you submit a Form 3, a corresponding Form 5 must also be filed.

You may report waste received from three different generators on each Form 3. A separate Waste Section must be filled out for each hazardous waste received from each off site generator. Identical hazardous waste from the same off site generator may be combined as long as the EPA Hazardous Waste Codes are the same, a single Form Code describes the composition, and all of the waste is managed in a single process system (i.e., same Management Method Code).

If your site received more than three hazardous wastes from off site generators during the report year, make additional copies of this form.

#### Waste Description

Please indicate whether waste is liquid or solid by placing an appropriate checkmark in the \_\_\_\_ Liquid or \_\_\_\_ Solid lines.

On line (1), provide a concise description of the waste including the source and generic chemical name or primary hazardous constituents. Example: "Ignitable spent solvent from degreasing operation in tool production; mixture of mineral spirits and kerosene."

On line (2), enter the exact waste description as it appears on the manifest.

For Lab packs – Use one Form 3 to identify each lab pack waste stream that contains the <u>same</u> waste codes and waste description. If waste codes or waste description vary, a separate Form 3 should be provided.

#### EPA Hazardous Waste Code(s)

Enter the four-character EPA hazardous waste code(s) that applies to the waste reported in Waste Description. These codes can be found in 401 KAR 31:030 and 31:040 and on copies of the manifest(s). If the waste stream was a lab pack, enter LABP along with a list of all EPA waste codes contained in the lab pack. Attach additional pages if necessary.

#### Name of Generator From Which This Waste Was Received

Identify the name of the generator that shipped this hazardous waste to your facility from the manifest form.

# **EPA ID Number of Generator From Which This Waste Was Received**

Identify the 12-character EPA ID Number for the generator that shipped waste to your facility from the manifest form. For Conditionally Exempt small quantity generators without EPA ID#'s, use the state abbreviation followed by CESQG00000, (i.e., KYCESQG00000).

#### **State Hazardous Waste Code**

Follow instructions for this field from Form 2 instructions (page 9).

#### Quantity Received in Report Year

Enter the total quantity of this hazardous waste stream received in 2009. Report in pounds. If your on site records do not identify the weight of the waste, you may use the Conversion Chart listed in Appendix A-4 or apply your knowledge of the weight of the waste to convert it to pounds.

#### Enter the Value Used to Convert This Waste to Pounds

If you used a conversion factor to obtain the weight of your waste, identify the value used to convert the waste amount into pounds here.

#### Form Code

See Form Codes listed in Appendix A-2 and A-3. Enter only one code.

#### Management Method Code

See Management Method Codes listed in Appendix A-5.

#### FORM 4 – Summary of Waste Shipped Off Site

Copy this form if additional space is needed.

#### List All Receiving Facilities

Identify the EPA ID number and name for each facility that received hazardous waste from your site. Double check ID numbers for 12-characters and accuracy.

#### <u>Total Number of Manifested Shipments</u>

Count each manifest only once and report the total number of manifests used to ship your waste to each receiving facility.

#### **Total Pounds Shipped**

Amounts reported in this column should balance with figures totaled from the Waste Shipped Off Site section on Form 2.

#### **List All Primary Transporters**

Complete the name and EPA ID number for each primary transporter used to ship your hazardous waste off site. Do not list secondary transporters.

# **Container Types**

Enter the two-letter container code from Item 12 on the manifest (e.g. DM, TT, DF...)

# FORM 5 - Summary of Waste Shipped to Your Site

Report all hazardous waste your company received in 2009. Copy this form if additional space is needed.

Instructions are the same as for FORM 4 except:

#### **Total Pounds Shipped**

Amounts reported in this column should balance with figures totaled from the quantities reported on Form 3. Include the 12-digit EPA ID# for all generators. For conditionally exempt small quantity generators with no EPA ID#, use the state abbreviation followed by "CESQG00000". Example: KYCESQG00000.

| Div<br>Ma<br>Ha<br>Bra<br>200 | vision of Waste<br>inagement<br>zardous Waste<br>anch<br>0 Fair Oaks Lane<br>ankfort, KY 40601 | Commonwealth of Kentucky Department for Environmental Protection  2009 Hazardous Waste Annual Report FORM 1 – Identification and Certification  Equivalent to EPA RCRA Subtitle C Site Identification Form  Commonwealth of Kentucky  Department of Kentucky  Por Official Use Only  Do not write in this space. |  |                |           |   |                       |                         |  |
|-------------------------------|--|--|--|----------------|-----------|---|-----------------------|-------------------------|--|
| 1.                            | Reason for<br>Submittal  |  | e Hazardous  | Waste Annual F | Report    |   |                       |                         |  |
| 2.                            | Site ID<br>Numbers   | A. EPA ID Number:  KY B. AGENCY INTEREST (AI) Number:  |  |                |           |   |                       |                         |  |
| 3.                            | Site Name  | Name:  |  |                |           |   |                       |                         |  |
| 4.                            | Site Location<br>Information   | Street Address:  |  |                |           |   |                       |                         |  |
|                               | (momation  | City:  |  | State: KY      |           | p Code:                                 |                       |                         |  |
| L                             |  | County:  |  |                |           |   |                       |                         |  |
| 5.                            | Land Type  | Site Land Type:   Pr   | Site Land Type: Private Federal State Municipal County |                |           |   |                       |                         |  |
| 6.                            | NAICS Code(s)<br>(see page 3)  | А.   | C.   |                |           | D.                                      |                       |                         |  |
| 7.                            | Site Contact & Mailing   | First Name:  | ***************************************                | MI:            |           | Last Name                               | e:                    |                         |  |
|                               | Address  | Phone Number:  |  |                | 2         | Phone Nu                                | mber Ext              | ension:                 |  |
|                               |  | E-Mail Address:  |  |                |           |   |                       |                         |  |
|                               |  | Street Address or P. O. I  |  |                |           | *************************************** |                       |                         |  |
|                               |  | City:  | State  | e: Co          | untry:    |   | Zip (                 | Code:                   |  |
| 8.                            | Site Operator Information  | Name of Site's Operator  |  |                | ********* |   |                       |                         |  |
|                               |  | Date Became Operator:  |  | Operator Typ   | e: 🗌 Pri  | ivate 🗌 Fed                             | deral 🗌 Sta           | te                      |  |
| 9.                            | Site Legal<br>Owner  | Name of Site's Legal Ow  | ner:   |                |           |   | 11 0000100 1001000000 |                         |  |
|                               | Information  | Date Became Owner:   |  | Owner Type:    |           |   | leral □ Sta           | te 🗌 Municipal 🔲 County |  |
|                               |  | Phone Number:  |  |                |           | Phone Nu                                | ımber Ext             |                         |  |
|                               |  | Street Address or P. O. E  | Box:   |                |           |   |                       |                         |  |
|                               |  | City:  | State:   |                | Count     | try:                                    |                       | Zip Code:               |  |
|                               | Legal<br>Landowner of  | Name of Landowner:   |  | ç              |           |   |                       |                         |  |
|                               | the Real<br>Property:  | Date Became Owner:   |  |                | ,         | ·                                       | _                     | State Municipal County  |  |
|                               |  | Phone Number:  |  |                |           | Phone Nu                                | ımber Ext             |                         |  |
|                               |  | Street Address or P. O. E  |  |                |           |   |                       |                         |  |
|                               |  | City:  | State:   |                | Country:  |   |                       | Zip Code:               |  |

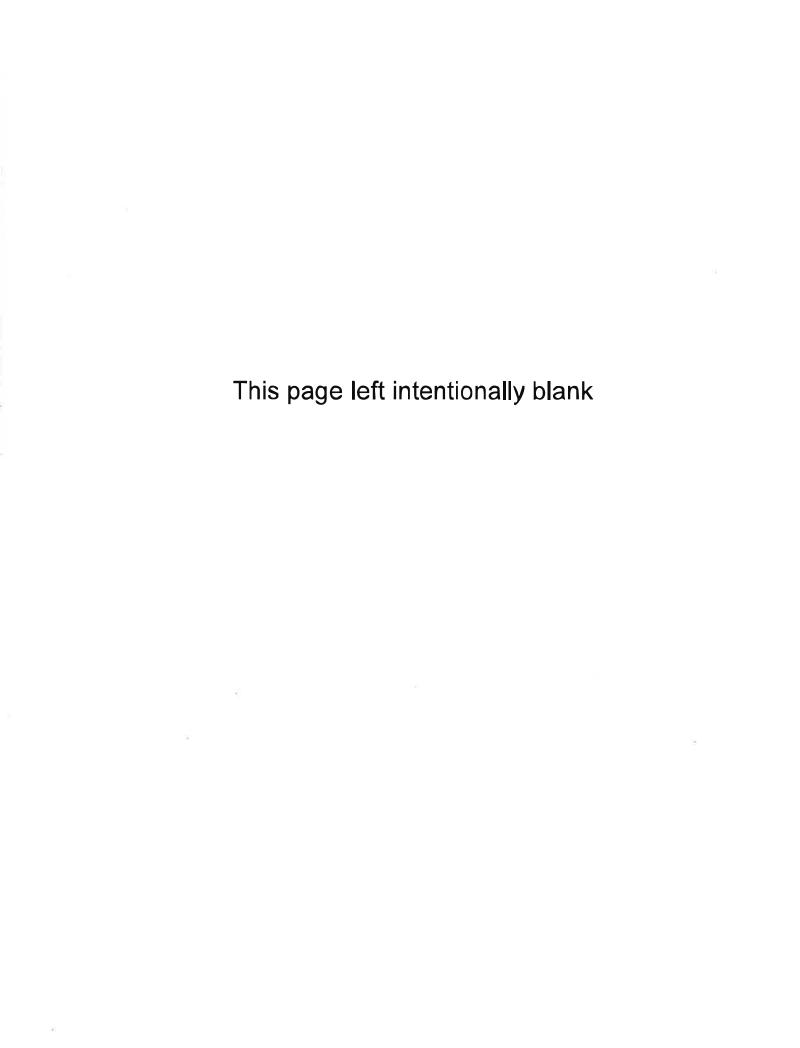
Page 1 of 3

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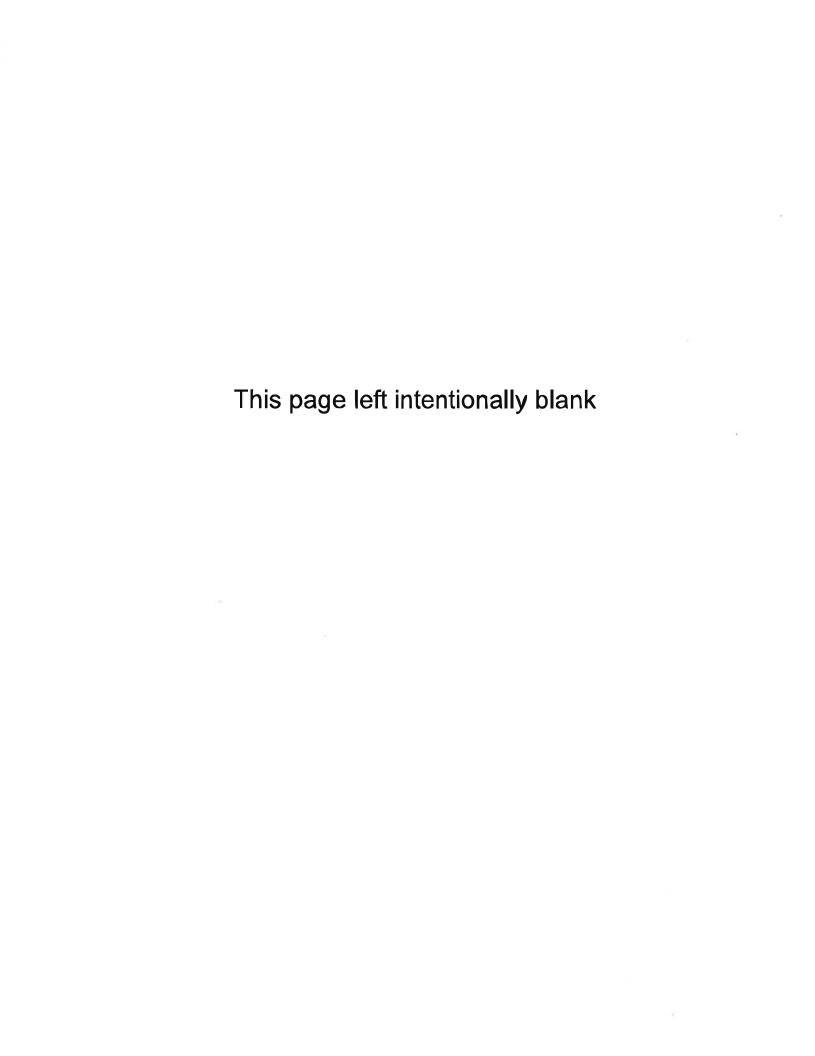
|   |                                       |  |                        | Al Number   | DEP 7072 Revised 2009                     |  |  |
|---|---------------------------------------|--|------------------------|---|---|--|--|
| 11. Type of Regulated Waste Activ<br>Mark "X" in the appropriate box(es) for  |                                       | rities at this loca  | tion.                  |   |   |  |  |
|   |                                       | ۱. Hazardous   | Waste Act              | ivities   |   |  |  |
| Generator of Hazardous Water  | aste                                  |  | 1                      | ited States Importer of Haza  |   |  |  |
| Select Yes or No<br>Is this a one-time-only hazardoù<br>☐Yes ☐No  | us waste act                          | vity report?   | ☐ 4 MI×                | ed Waste (hazardous and r   | adioactive) Generator                     |  |  |
| Choose only one of the following t  |                                       | ies:   | ☐ 5. Tra               | nsporter of Hazardous Was   | te  |  |  |
| a. Large Quantity General<br>(over 2,200 pounds general<br>month, cannot be averaged  | <u>ited</u> in any on                 | e calendar   | (cı                    | eatment/Storage/Disposal F<br>Irrently have or have applied for t   | a Part B Permit)                          |  |  |
| ☐ b. Small Quantity Generator   |                                       |  |                        | cycler of Hazardous Waste   |   |  |  |
| (220-2,200 pounds general month, cannot be averaged  ☐ c. Conditionally Exempt Smalless than 220 pounds general cannot be averaged. | Generator:                            | 8. Exempt Boiler and/or Industrial Furnace  Mark "X" in all boxes that apply  a. Small Quantity On-Site Burner Exemption  b. Smelting, Melting, and Refining Furnace Exemption |                        |   |   |  |  |
| calendar month, cannot be  2. Fuel Burner of Hazardous Recovery (mark the approp a. Industrial Boiler b. Industrial Furnace         |                                       | 9. Underground Injection Well  |                        |   |   |  |  |
| B. Universal Waste /  |                                       |  | C. Used Oil Activities |   |   |  |  |
| 1. Large Quantity Universal Was     (over 11,000 pounds on-site sto   |                                       |  |                        | Mark "X" in all boxes   | that apply                                |  |  |
| •   |                                       |  |                        |   |   |  |  |
| Mark "X" in all boxes that apply  | Generate                              | Accumulate   |                        | ed OII Transporter<br>his box is marked, also indica<br>a. Transporter<br>b. Transfor Encilly   | te type(s) of activity(ies);              |  |  |
| a. Batteries  | Generate                              | Accumulate   |                        | his box is marked, also indica  | te type(s) of activity(ies):              |  |  |
|   | Generale                              | _  |                        | his box is marked, also indica<br>a. Transporter  | -refiner                                  |  |  |
| a. Batteries  | Generale                              |  |                        | his box is marked, also indica<br>a. Transporter<br>b. Transfer Facility<br>ed Oil Processor and/or Re  | -refiner                                  |  |  |
| a. Batteries     b. Unused Pesticides   | Generale                              |  |                        | his box is marked, also indicated a. Transporter b. Transfer Facility ed Oil Processor and/or Rehis box is marked, also indicated a. Processor b. Re-refiner  | -refiner<br>ite type(s) of activity(ies): |  |  |
| <ul><li>a. Batteries</li><li>b. Unused Pesticides</li><li>c. Thermostats</li><li>d. Spent Lamps</li></ul>                           | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ |  |                        | his box is marked, also indicated a. Transporter b. Transfer Facility bed Oil Processor and/or Rehis box is marked, also indicated a. Processor b. Re-refiner | -refiner<br>ite type(s) of activity(ies): |  |  |

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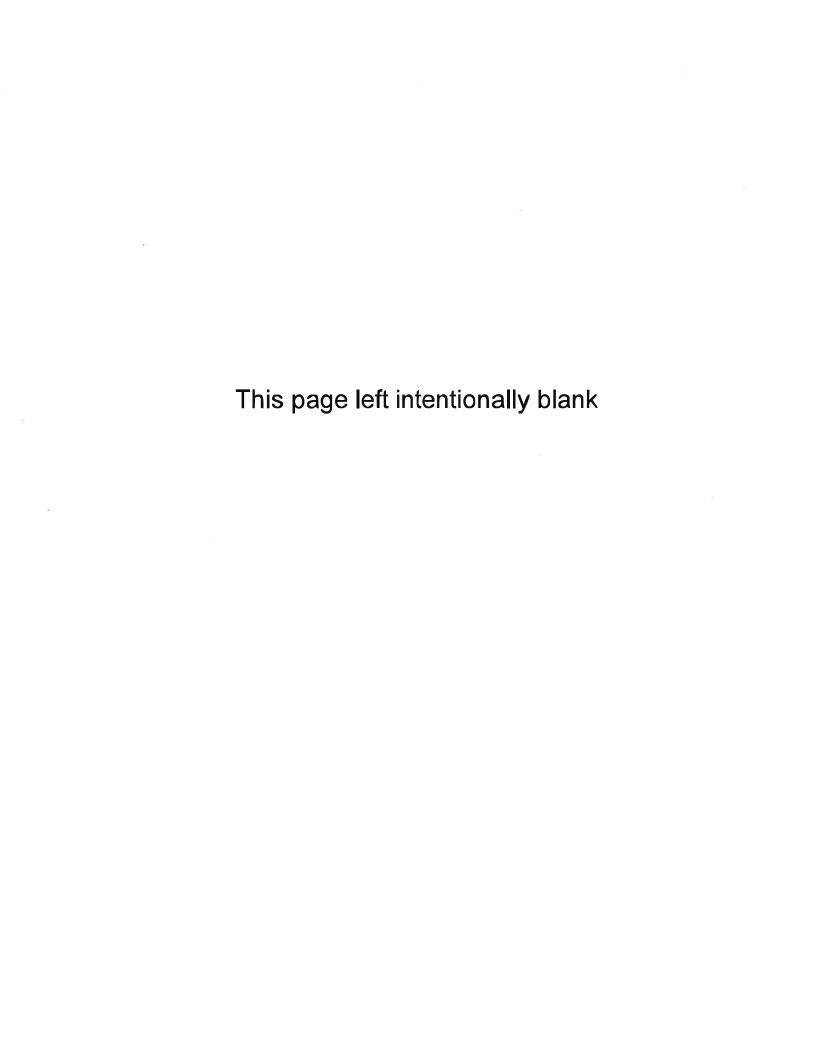
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|---|---|---|---|---|-------------------------------|------------------------|---|---|--|---|
| 12. Descr   | iption of Haz                           | ardous Was                              | ites                                    |   |                               |                        |   |   |  |   |
| A. Waste Codes for Federally Regulated Hazardous Wastes. List the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (i.e., D001, D003, F007, U112). Use an additional page if more |   |   |   |   |                               |                        |   |   |  |   |
| your site. I  |   | e order they                            | are presented                           | in the regula                           | itions (i.                    | e., D001               | , D003, F007                            | , U112). Use                            | e an additional                        | page if more                            |
|   | *************************************** |   | ····                                    |   |                               |                        | ,                                       | <u> </u>                                |  |   |
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|   |   |   |   |   |                               |                        | # # # # # # # # # # # # # # # # # # #   |   |  | İ                                       |
|   |   | 1                                       | i                                       |   |                               |                        |   |   |  |   |
|   |   |   |   | <u> </u>                                |                               |                        |   | <b>†</b>                                |  | †                                       |
|   |   |   |   |   |                               |                        |   |   |  |   |
| D. W C  |   |   |   |   | <u>,l</u>                     |                        | L                                       | İ                                       | ļ                                      | L                                       |
| 224.50-130).  | Dies for State-<br>List the waste       | Regulated (i.e. codes of the            | e., non-Federal)<br>State-regulated     | Hazardous W<br>hazardous wa             | <b>/astes.</b> (<br>stes hand | N001, N0<br>Iled at yo | 002, and N003.<br>our site. Leave       | Nerve and bli                           | ster agents as re<br>k N/A if State Wa | quired by KRS<br>ste Codes are          |
|   | e to your site.                         | 7                                       | ····•                                   |   |                               |                        | ······                                  | Υ                                       | ······································ | ·                                       |
|   |   |   |   |   |                               |                        |   |   |  |   |
|   | <u> </u>                                | L                                       |   |   |                               |                        |   |   |  |   |
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|   |   | 1                                       |   | **                                      |                               |                        |   | ł                                       |  |   |
|   |   |   |   |   |                               |                        |   |   |  |   |
|   | <b></b>                                 | <u>.</u>                                |   |   |                               |                        | ·<br>•<br>•<br>•                        | Į                                       |  | ļ                                       |
| 13. Comme   | nts (Additional                         | Information                             | that will clarify                       | any item in th                          | is report                     | .)                     |   |   |  |   |
| ***************************************   |   |   |   |   | ***********                   |                        |   |   |  |   |
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|   |   |   |   |   |                               |                        |   |   |  |   |
| 14. Certific  | ation                                   |   |   |   |                               |                        |   |   |  |   |
|   |   |   |   |   |                               |                        |   |   | r supervision ir                       |   |
| with a syste<br>inquiry of th   | em designed i<br>e person or i          | to assure th                            | at qualified pe                         | evetem or l                             | perly ga                      | ther and               | d evaluate the                          | e information                           | n submitted.  E<br>thering the info    | Based on my                             |
| information s   | submitted is,                           | to the best o                           | of my knowled                           | ge and belief                           | , true, a                     | ccurate,               | and complet                             | e. I am awa                             | re that there a                        |   |
|   |   |   | on, including ti<br>ise sign in blu     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | of fine a                     | nd impn                | ************************                |   | *****************                      |   |
| A. Signatur   | e (minar ng 0                           | i igilial. Plea                         | ise sign in DIL                         | ie irik);                               |                               |                        | В.                                      | Date Signe                              | au.                                    |   |
|   |   |   |   |   |                               |                        |   |   |  | <del></del>                             |
| C. Typed or   | Printed Sign                            | natory Nam                              | e:                                      |   |                               | D. Of                  | ficial Title of                         | Signatory:                              |  |   |
|   |   |   |   |   |                               |                        |   |   |  |   |



| DEP 7              | 7072. Revised 2009  | Å.  |                        |  |  | Page of                                     |     |  |
|--------------------|---|---|------------------------|--|--|---|-----|--|
|                    |   |   | 9 Hazardo<br>: – Waste | ous Was<br>Genera                          | of Kentucky<br>ste Annual Re<br>stion and Mana<br>PA Form GM |   |     |  |
| EPA ID             | Number  |   |                        |  | Agency Int   | terest Number                               |     |  |
| Site Na            | i <b>me</b> (As shown on R  | Registration)                                       |                        |  |  |   |     |  |
| Waste              | Description (Se   | e instructions.) Check on                           | e:Lir                  | quid                                       | Solid  |   |     |  |
| (1) (Ge            | eneral)   |   |                        |  |  |   |     |  |
| (2) (Ite           | m 9b of manifes   | st)   |                        |  |  |   |     |  |
| EPA Ha             | azardous Waste  | Code(s)   |                        |  |  |   |     |  |
| W                  | e Hazardous<br>/aste Code<br>if applicable)   | Source Code *(Specify other) *G**H **(For G25 only) | Form C<br>(Specify C   |  |  | ste both hazardous and radioactive?  Yes No |     |  |
| -                  | Quantity Generated in Report Year pounds  Enter the value used to convert this waste to pounds  (Leave blank if waste amount is already listed in pounds) |   |                        |  |  |   | 5   |  |
| Was an<br>publicly | owned treatmen  |   | ? Check                | One.                                       | ,  | disposal, or by discharge to a sewer        | ror |  |
|                    | On-site   | Process System 1                                    |                        |  |  | On-site Process System 2                    |     |  |
| Or                 | n Site Manageme   | ent Method Code:                                    | н                      | _  | On Site Management Method Code: H                            |   |     |  |
| Qı<br>             | uantity treated, re   | ecycled, disposed: (C                               | •                      | e)<br>unds                                 | Service course.  |   |     |  |
|                    | SHIPPED OFF<br>y of this waste sh   | SITE hipped off site in 2009 Yes – Continue cor     | 9 for treat            | tment, di                                  |  |   |     |  |
| Site               | Name o  | of receiving facility:                              |                        |  |  | Ī   |     |  |
| 1                  | EPA ID Num  | ber of receiving fac                                | ility:                 | Off Site<br>Management<br>Method Code<br>H |  | Total Quantity Shipped in 2009              |     |  |
| Site 2             | Name o  | of receiving facility:                              |                        | (  | Off Site   | Total Quantity Shipped in 2009              |     |  |
|                    | EPA ID Num  | ber of receiving fac                                | ility:                 | Management  Method Code                    |  | pounds                                      |     |  |



| DEP 707    | 2. Revised 2009  |   |         |                              | Page of   |  |  |
|------------|--|---|---------|------------------------------|---|--|--|
|            | Commonwealth of Kentucky 2009 Hazardous Waste Annual Report FORM 3 — Waste Received From Off Site  Equivalent to EPA Form WR |   |         |                              |   |  |  |
| EPA ID     | Number   |   |         | Agency Interest N            | lumber  |  |  |
| Site Na    | ime (Exactly as on Reg   | istration)  |         |                              |   |  |  |
| Waste<br>1 |  |   |         | ck one:Solid                 |   |  |  |
| Haza       | EPA<br>ardous Waste<br>Code(s)   | EPA State Name of generator from which this waste was received ous Waste Hazardous        |         |                              |   |  |  |
|            |  |   |         |                              |   |  |  |
|            | Quantity Received  | in Report Year  |         |                              | convert this waste to pounds<br>bunt is already listed in pounds) |  |  |
|            | Form Code  | Is this waste   | both h  | nazardous and radioactive?   | Management Method Code  |  |  |
| i          | w  | _   | Yes     | No                           | н   |  |  |
|            | Tweete Donneistic  |   |         |                              |   |  |  |
| Waste      | Waste Description (See instructions.) Check one:LiquidSolid (1) (General)  |   |         |                              |   |  |  |
| 2          | (2) (Manifest)   |   |         |                              |   |  |  |
| Haza       | EPA<br>ardous Waste<br>Code(s)   | State<br>Hazardous<br>Waste Code  | ľ       | Name of generator from whic  | h this waste was received   |  |  |
|            |  | (if applicable)   | EPA II  | D Number of generator from v | which this waste was received                                     |  |  |
| (          | Quantity Received  | l in Report Year  |         |                              | convert this waste to pounds<br>bunt is already listed in pounds) |  |  |
|            | Form Code  | Is this waste   | both h  | nazardous and radioactive?   | Management Method Code  |  |  |
|            | w  |   | _Yes    | No                           | н   |  |  |
|            | Waste Description  | n (See instructions.  | ) Check | k one:LiquidSolid            |   |  |  |
| Waste<br>3 | (1) (General)  |   |         |                              |   |  |  |
| ,          | (2) (Manifest)   |   |         |                              |   |  |  |
|            | EPA<br>Irdous Waste  | State<br>Hazardous  | N       | Name of generator from which | h this waste was received   |  |  |
|            | Code(s)  | Waste Code (if applicable)  EPA ID Number of generator from which this waste was received |         |                              |   |  |  |
| C          | Quantity Received  | in Report Year  |         |                              | convert this waste to pounds<br>ount is already listed in pounds) |  |  |
|            |  |   |         |                              |   |  |  |
| -          | Form Code  | Is this waste   | both h  | azardous and radioactive?    | Management Method Code  |  |  |



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# Commonwealth of Kentucky 2009 Hazardous Waste Annual Report FORM 4 – Summary of Waste Shipped Off Site

| EPA ID Number Agen   | icy Interest Number                        |   |                    |  |  |
|--|--|---|--------------------|--|--|
| Site Name (Exactly as on Registration)   |  |   |                    |  |  |
| List all receiving facilities. List each facility only once.   | Total Number<br>of Manifested<br>Shipments | Total Pounds<br>for reporting                 |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| EPA ID Number Facility Name  |  |   |                    |  |  |
| Total  |  |   |                    |  |  |
| List all primary transporters.  List each primary transporter only once. Do not list secondary transporters. | Total Number<br>of Manifested<br>Shipments | Total Pounds<br>Shipped<br>for reporting year | Container<br>Types |  |  |
| EPA ID Number  Transporter Name  |  |   |                    |  |  |
| EPA ID Number  Transporter Name  |  |   |                    |  |  |
| EPA ID Number  |  |   |                    |  |  |
| EPA ID Number  Transporter Name  |  |   |                    |  |  |
| Total  |  |   |                    |  |  |

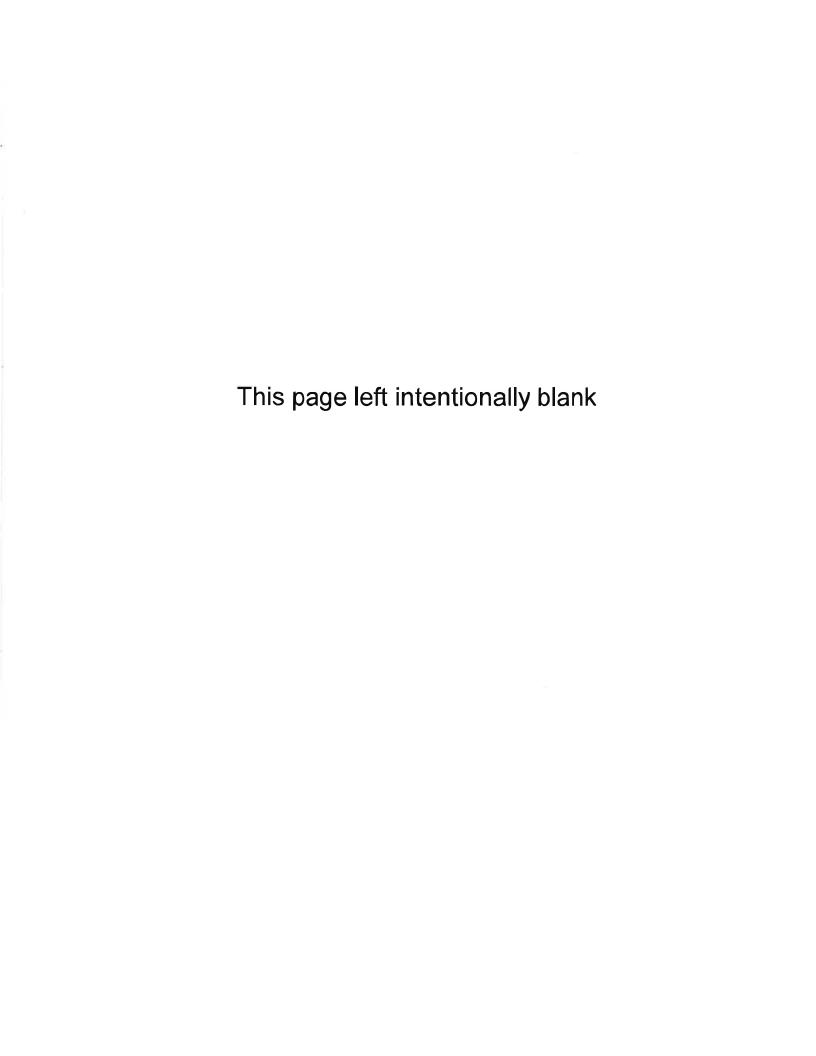
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| DEP 7072. | Revised | 2009 |
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# Commonwealth of Kentucky 2009 Hazardous Waste Annual Report FORM 5 – Summary of Waste Shipped To Your Site

| e-v  |                                    |          |   |                    |
|--|------------------------------------|----------|---|--------------------|
| EPA ID Number  | Agency Interes                     | t Number |   |                    |
| Site Name (Exactly as on Registration)   |                                    |          |   |                    |
| List all generators that sent waste to your facility.  List each facility only once.                         | Total Num<br>of Manifes<br>Shipmen | ted 10   | Total Pounds Shipped for reporting year |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Generator Name   |                                    |          |   |                    |
| Total  |                                    |          |   |                    |
| List all primary transporters.  List each primary transporter only once. Do not list secondary transporters. | Total Num<br>of Manifes<br>Shipmen | ed S     | al Pounds<br>hipped<br>porting year     | Container<br>Types |
| EPA ID Number  | _                                  |          |   |                    |
| Transporter Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Transporter Name   |                                    |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Transporter Name   | _                                  |          |   |                    |
| EPA ID Number  |                                    |          |   |                    |
| Transporter Name   |                                    |          |   |                    |
| Total  |                                    |          |   |                    |



# SOURCE CODES

Source codes describe the type of process or activity (i.e., source) from which a hazardous waste was generated.

|  | enerated.  |  |  |  |
|--|--|--|--|--|
| Code   | 1  |  |  |  |
| Wastes from Ongoing Production and Service Processes |  |  |  |  |
| G01  | Dip, flush or spray rinsing  |  |  |  |
|  | Stripping and acid or caustic cleaning   |  |  |  |
|  | Plating and phosphating  |  |  |  |
|  | Etching  |  |  |  |
| G05  | Metal forming and treatment (pickling, heat treating, etc.)                              |  |  |  |
|  | Painting and coating   |  |  |  |
|  | Product and by-product processing  |  |  |  |
| G08  | Removal of spent process liquids or catalysts  |  |  |  |
| G09  | Other production or service-related processes (specify)                                  |  |  |  |
|  | Other Intermittent Events or Processes   |  |  |  |
| G11  | Discarding off-specification or out-of-date chemicals or products                        |  |  |  |
| G12  | Lagoon or sediment dragout and leachate collection                                       |  |  |  |
| G13  | Cleaning out process equipment   |  |  |  |
| G14  | Removal of tank sludge, sediments or slag  |  |  |  |
| G15  | Process equipment change-out or discontinuation of equipment use                         |  |  |  |
|  | Oil changes and filter or battery replacement  |  |  |  |
|  | Other one-time or intermittent processes (specify)                                       |  |  |  |
|  | Pollution Control and Waste Management Process Residuals                                 |  |  |  |
| G21  | Air pollution control devices (baghouse dust, etc.)                                      |  |  |  |
|  | Laboratory analytical wastes (used chemicals)  |  |  |  |
|  | Wastewater treatment (sludge, filter cake, etc.)   |  |  |  |
|  | Solvent or product distillation or recovery (sludge, waste)                              |  |  |  |
|  | Hazardous waste management - indicate management method                                  |  |  |  |
|  | Storage and disposal unit leachate collection  |  |  |  |
|  | Spills and Accidental Releases   |  |  |  |
| G31  | Accidental contamination of products, materials or containers                            |  |  |  |
|  | Cleanup of spill residues  |  |  |  |
|  | Leak collection and floor sweeping   |  |  |  |
|  | Other cleanup of current contamination (specify)   |  |  |  |
|  | Remediation of Past Contamination  |  |  |  |
| G41  | Closure of hazardous waste management unit under KY Hazardous Waste Program              |  |  |  |
|  | Corrective action at a solid waste management unit under KY Hazardous Waste Program      |  |  |  |
|  | Remedial action or emergency response under KRS 224.01-400 (state "Superfund")           |  |  |  |
|  | State program or voluntary cleanup   |  |  |  |
|  | Underground storage tank cleanup   |  |  |  |
|  | Other remediation (specify)  |  |  |  |
| •  | Waste Not Physically Generated On Site   |  |  |  |
| G61  | Hazardous waste received from off site for storage/bulking and transfer off site for     |  |  |  |
|  | treatment or disposal  |  |  |  |
|  | Hazardous waste received from a foreign country (other than a foreign Department of      |  |  |  |
|  | Defense site, Maquiladora, US territory or protectorate). This site was the generator of |  |  |  |
|  | record.  |  |  |  |

# FORM CODES

Form codes describe the general physical and chemical characteristics of a hazardous waste.

| Code W001   | Form Code Group  Mixed Media/Debris/Devices - Waste that is a mixture of organic and inorganic wastes, liquid and solid wastes, or devices that are not easily categorized |  |  |  |
|---|--|--|--|--|
| W001  |  |  |  |  |
| W001  | wastes, liquid and solid wastes, or devices that are not easily categorized  |  |  |  |
| VV001   |  |  |  |  |
| 14/000  | Lab packs with no acute hazardous waste  |  |  |  |
|   | Contaminated debris: paper, clothing, rags, wood, empty fiber or plastic   |  |  |  |
|   | containers, glass, piping, other solids  |  |  |  |
|   | Lab packs containing acute hazardous waste   |  |  |  |
|   | Contaminated soil  |  |  |  |
|   | Batteries, battery parts, cores, casings   |  |  |  |
|   | Filters, solid adsorbents, ion exchange resins and spent carbon  |  |  |  |
|   | Electrical devices (lamps, thermostats, CRTs, etc.)  |  |  |  |
|   | Sediment or lagoon dragout, drilling or other muds   |  |  |  |
| W801  | Compressed gases   |  |  |  |
| Inorganic Liquids - Waste that is primarily inorganic and highly fluid (e.g., |  |  |  |  |
| 101101  | aqueous), with low suspended inorganic solids and low organic content  |  |  |  |
|   | Very dilute aqueous waste containing more than 99% water   |  |  |  |
|   | Spent concentrated acid  |  |  |  |
|   | /105 Acidic aqueous wastes less than 5% acid   |  |  |  |
|   | Aqueous waste containing cyanides  |  |  |  |
|   | /110 Caustic aqueous waste without cyanides  |  |  |  |
|   | Other aqueous waste or wastewaters   |  |  |  |
|   | Waste liquid mercury   |  |  |  |
| W119 (  | Other inorganic liquid (specify)   |  |  |  |
|   | Organic Liquids - Waste that is primarily organic and is highly fluid, with low  |  |  |  |
|   | inorganic solids content and low-to-moderate water content   |  |  |  |
|   | Still bottoms in liquid form   |  |  |  |
|   | Concentrated halogenated (e.g., chlorinated) solvent   |  |  |  |
|   | Concentrated non-halogenated (e.g., non-chlorinated) solvent   |  |  |  |
|   | Concentrated halogenated/ non-halogenated solvent mixture  |  |  |  |
|   | Oil-water emulsion or mixture  |  |  |  |
|   | Vaste oil  |  |  |  |
|   | Paint, ink, lacquer, or varnish  |  |  |  |
|   | Reactive or polymerizable organic liquids and adhesives  |  |  |  |
|   | Paint thinner or petroleum distillates   |  |  |  |
| W219 C  | Other organic liquid (specify)   |  |  |  |

# FORM CODES (Continued)

| Code   | Source Code Group  |
|--------|--|
|        | Inorganic Solids - Waste that is primarily inorganic and solid, with low organic |
|        | content and low-to-moderate water content; not pumpable                          |
| W303   |  |
|        | Slags, drosses, and other solid thermal residues                                 |
|        | Metal scale, filings and scrap (including metal drums)                           |
| W312   | Cyanide or metal cyanide bearing solids, salts or chemicals                      |
| W316   | Metal salts or chemicals not containing cyanides                                 |
| W319   | Other inorganic solids (specify)   |
|        | Organic Solids - Waste that is primarily organic and solid, with low-to-moderate |
| 14/404 | inorganic content and water content; not pumpable                                |
|        | Pesticide solids   |
|        | Solid resins, plastics or polymerized organics                                   |
|        | Explosives or reactive organic solids  |
| VV409  | Other organic solids (specify)   |
|        | Inorganic Sludges - Waste that is primarily inorganic, with moderate-to-high     |
| 11504  | water content and low organic content; mostly pumpable                           |
| VV501  | Lime and/or metal hydroxide sludges and solids with no cyanides                  |
| VV503  | Gypsum sludges from wastewater treatment or air pollution control                |
| W504   | Other sludges from wastewater treatment or air pollution control                 |
| VV505  | Metal bearing sludges (including plating sludge) not containing cyanides         |
|        | Cyanide-bearing sludges  |
| W519   | Other inorganic sludges (specify)  |
|        | Organic Sludges - Waste that is primarily organic with low-to-moderate inorganic |
| Mena   | solids content and water content; pumpable                                       |
|        | Oily sludge  |
|        | Paint or ink sludges, still bottoms in sludge form                               |
|        | Resins, tars, polymer or tarry sludge  |
| VV009  | Other organic sludge (specify)   |

#### **Conversion Rates**

All quantities on the Hazardous Waste Annual Report and the Assessment Return must be reported in pounds. Use these conversion rates if you don't know the weight of your waste.

# For example:

To convert 25 gallons to pounds, multiply 25 (gallons) by 8.34 (the weight of water) = 208.5 pounds.

To convert 50 tons into pounds, multiply 50 (tons) by 2000 (pounds) = 100,000 pounds.

|             | Conversion          |            |
|-------------|---------------------|------------|
|             | Rates               |            |
|             | Chart               |            |
|             |                     | Multiplier |
| Unit        | Physical State      | to         |
|             |                     | Pounds     |
| Gallons     | Liquid              | 8.34       |
|             | Sludge/Solid        | 11.09      |
| Cubic Yards | Liquid              | 1684.8     |
|             | Sludge/Solid        | 2240       |
| Liters      | Liquid              | 2.203      |
| Kilogram    | Liquid/Sludge/Solid | 2.204      |
| Pounds      | Liquid/Sludge/Solid | 1          |
| Tons        | Liquid/Sludge/Solid | 2000       |

# **MANAGEMENT METHOD CODES**

Management Method codes describe the type of hazardous waste management system used to treat or dispose a hazardous waste.

| Code | Management Method Code Group  |  |  |
|------|---|--|--|
|      | Reclamation and Recovery  |  |  |
| H010 | Metals recovery including retorting, smelting, chemical, etc.   |  |  |
| H020 | Solvents recovery   |  |  |
| H039 | Other recovery or reclamation for reuse including acid regeneration, organics   |  |  |
|      | recovery, etc. (specify)  |  |  |
| H050 | Energy recovery at this site - use as fuel (includes on-site fuel blending)   |  |  |
| H061 | Fuel blending prior to energy recovery at another site  |  |  |
|      | Destruction or Treatment Prior to Disposal at Another Site  |  |  |
| H040 | Incineration - thermal destruction other than use as a fuel   |  |  |
| H071 | Chemical reduction with or without precipitation  |  |  |
| H073 | Cyanide destruction with or without precipitation   |  |  |
| H075 | Chemical oxidation  |  |  |
| H076 | Wet air oxidation   |  |  |
| H077 | Other chemical precipitation with or without pre-treatment  |  |  |
| H081 | Biological treatment with or without precipitation  |  |  |
| H082 | Adsorption  |  |  |
| H083 | Air or steam stripping  |  |  |
| H101 | Sludge treatment and/or dewatering  |  |  |
| H103 | Absorption  |  |  |
| H111 | Stabilization or chemical fixation prior to disposal at another site  |  |  |
| H112 | Macro-encapsulation prior to disposal at another site   |  |  |
| H121 | Neutralization only   |  |  |
| H122 | Evaporation   |  |  |
| H123 | Settling or clarification   |  |  |
| H124 | Phase separation  |  |  |
| H129 | Other treatment (specify)   |  |  |
|      | Disposal  |  |  |
| H131 | Land treatment or application (to include on-site treatment and/or stabilization)   |  |  |
| H132 | Landfill or surface impoundment that will be closed as landfill (to include on-site   |  |  |
|      | treatment and/or stabilization)   |  |  |
| H134 | Deepwell or underground injection (with or without treatment)   |  |  |
| H135 | Discharge to sewer/POTW or NPDES (with prior storage - with or without treatment)   |  |  |
|      | Storage and Transfer  |  |  |
|      | Storage, bulking, and/or transfer off site - no treatment/recovery (H010-H129), fuel blonding (H061), or disposal (H131 H135) at this site. |  |  |
|      | fuel blending (H061), or disposal (H131-H135) at this site  |  |  |

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